Fill in this inf	ormation to ic	lentify your case	and this filing:		
Debtor 1	Emerick		McKesey		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
		•	ST. OF PENNSYLVANIA		
Case number (if known)	17-16223AMC	13		—	k if this is an ded filing
Official Form	106A/P				
		_			40/45
Schedule A	B: Property	/			12/15
1. Do you own		<u> </u>	ng, Land, or Other Real E		e an Interest In
✓ Yes. Wh	nere is the property		he property?	Do not deduct secured cla	aims or exemptions. Put the
106 N. 9th Stree			that apply.	amount of any secured cla Creditors Who Have Clain	
Street address, if avail	able, of other descrip	Duple	e-family home ex or multi-unit building lominium or cooperative	Current value of the entire property?	Current value of the portion you own?
Darby		023 Manu	ufactured or mobile home	\$73,876.00	\$73,876.00
County	State ZIP	Time	stment property share r <u>106 N. 9th Street, Darby P</u>	Describe the nature of your ownership interest (such as fee simple, tenancy by the	
106 N. 9th Stree		Who has Check on	an interest in the property? e.	Fee Simple	
Darby PA 19023 ResidenceBOA FMV = \$73,876		☐ Debte		Check if this is commerced (see instructions)	munity property
			ormation you wish to add abou	t this item, such as local	

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Debtor 1 Emerical	k McKesey	Cas	se number (if known)17-10	6223AMC13	
1.2. 852 Main Street, Darby, Pa 19023 Rental PropertyFrolove Appraisel County		What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Do not deduct secured claims or exemptions. Pu amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$0.00 Current value of the portion you own? \$0.00 Describe the nature of your ownership interest (such as fee simple, tenancy by the		
		Other 852 Main Street, Darby, Pa Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Fee Simple Check if this is comm (see instructions)	· 	
		Other information you wish to add about property identification number:	this item, such as local	_	
		own for all of your entries from Part 1, inclu Part 1. Write that number here		\$73,876.00	
Part 2: Descr	ibe Your Vehicles		•		
3. Cars, vans, truck	else drives. If you lease	e a vehicle, also report it on Schedule G: Exec	cutory Contracts and Unexpir	ed Leases.	
3.1. Make: Chevrolet Model: Equinox Year: 2013 Approximate mileage: 60,000		Who has an interest in the property? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Do not deduct secured claims or exemptions. Property amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property Current value of the entire property? \$9,430.00 Current value of the portion you own? \$9,430.00		
Other information: 2013 Chevrolet Equ 60000 miles) KBB FMV \$9,430 Pc Cramdown		Check if this is community property (see instructions)			
3.2. Make: Ford Model: f-150		Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.		
Year:	1997	Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?	
Approximate mileage:	160,000	At least one of the debtors and another	\$488.00	\$488.00	
Other information: 1997 Ford f-150 (apmiles) KBB FMV	pprox. 160000	Check if this is community property (see instructions)			

Deb	otor 1	Emerick McKesey	Case number (if known)	17-16223AMC13
4.		raft, aircraft, motor homes, ATVs and other recreational vehicles, other les: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobile		
5.	Add the	e dollar value of the portion you own for all of your entries from Part 2,		\$9,918.00
	entries	for pages you have attached for Part 2. Write that number here		7
P	art 3:	Describe Your Personal and Household Items		
Do	you own	or have any legal or equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		nold goods and furnishings		
		es: Major appliances, furniture, linens, china, kitchenware		
		s. Describe 4. Household goods and furnishings		\$850.00
7.	Electro			
		les: Televisions and radios; audio, video, stereo, and digital equipment; com music collections; electronic devices including cell phones, cameras, m	·	;
	☑ No	- Describe		
	☐ Yes	s. Describe		
8.		ibles of value 'es: Antiques and figurines; paintings, prints, or other artwork; books, picture stamp, coin, or baseball card collections; other collections, memorabilia	•	
	✓ No ☐ Yes	s. Describe		
9.		nent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, portion canoes and kayaks; carpentry tools; musical instruments	ool tables, golf clubs, skis;	
	✓ No ☐ Yes	s. Describe		
10.		ns les: Pistols, rifles, shotguns, ammunition, and related equipment		
	✓ No ☐ Yes	s. Describe		
11.		s les: Everyday clothes, furs, leather coats, designer wear, shoes, accessorie	S	
	☐ No ✓ Yes	s. Describe 6. Wearing apparel		\$100.00
12.	Jewelr y Example	 y les: Everyday jewelry, costume jewelry, engagement rings, wedding rings, hegold, silver 	eirloom jewelry, watches, ç	gems,
	✓ No ☐ Yes	s. Describe		
13.		rm animals les: Dogs, cats, birds, horses		
	☑ No	s. Describe		

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Deb	tor 1	Emerick McKesey		Case number (if known)1	7-16223AMC13
14.	did not No Yes	•	d items you did not already list,	including any health aids you	
15.		•	entries from Part 3, including an		\$950.00
Pa	art 4:	Describe Your Final	ncial Assets		
Doy	ou own	or have any legal or equit	able interest in any of the follow	ing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.		es: Money you have in your petition	wallet, in your home, in a safe de	posit box, and on hand when you file your	
	✓ No ☐ Yes	S		Cash:	
17.	-			s of deposit; shares in credit unions, ve multiple accounts with the same	
	☐ No ✓ Yes	3	Institution name:		
	17	.1. Checking account:	Checking accountTD Bar	nk	\$250.00
18.	Example No	mutual funds, or publicly tes: Bond funds, investment	accounts with brokerage firms, mo	oney market accounts	
19.	_			corporated businesses, including	
	✓ No ☐ Yes	rest in an LLC, partnership s. Give specific brmation about m	, and joint venture of entity:	% of ownership	o:
20.	Govern Negotia	ment and corporate bonds	and other negotiable and non-r	negotiable instruments omissory notes, and money orders.	
	info	s. Give specific ermation about mlssuer r	name:		
21.		nent or pension accounts les: Interests in IRA, ERISA, profit-sharing plans	Keogh, 401(k), 403(b), thrift savir	ngs accounts, or other pension or	
	_	s. List each ount separately. Type of a	account: Institution name:		

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Deb	tor 1 Emerick McKesey	Case number (if known)	17-16223AMC13
22.	Security deposits and prepayments Your share of all unused deposits you have made so that you may continue se Examples: Agreements with landlords, prepaid rent, public utilities (electric, ga companies, or others		
	✓ No ☐ Yes Institution name or individual:		
23.	Annuities (A contract for a specific periodic payment of money to you, either ☑ No	for life or for a number of years)	
	Yes Issuer name and description:		
24.	Interests in an education IRA, in an account in a qualified ABLE program, 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	or under a qualified state tuition	on program.
	✓ No✓ Yes Institution name and description. Separately file to	the records of any interests. 11 U	J.S.C. § 521(c)
25.	Trusts, equitable or future interests in property (other than anything listed powers exercisable for your benefit	d in line 1), and rights or	
	NoYes. Give specific information about them		
26.	Patents, copyrights, trademarks, trade secrets, and other intellectual properties: Internet domain names, websites, proceeds from royalties and lice		
	NoYes. Give specific information about them		
27.	Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdi	ngs, liquor licenses, professional	licenses
	✓ No Yes. Give specific information about them		
Mor	ney or property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you		
	☑ No		
	Yes. Give specific information	Fe	ederal:
	about them, including whether you already filed the returns	Si	ate:
	and the tax years	Lo	ocal:
29.	Family support Examples: Past due or lump sum alimony, spousal support, child support, ma	intenance, divorce settlement, pr	operty settlement
	✓ No ✓ Yes. Give specific information	Alimony:	
	La rece erre operante una matter.	Maintenance:	
		Support:	
		Divorce settle	ment:
		Property settle	ement:

Deb	tor 1 Emerick McKesey	Case number (if known) _	17-16223AMC13
30.	Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability beneficompensation, Social Security benefits; unpaid loans you may		
	✓ No☐ Yes. Give specific information		
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (H	SA); credit, homeowner's, or renter's	insurance
	✓ No Yes. Name the insurance company of each policy and list its value Company name:	Beneficiary:	Surrender or refund value:
32.	Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insuentitled to receive property because someone has died	rrance policy, or are currently	
	✓ No ☐ Yes. Give specific information		
33.	Claims against third parties, whether or not you have filed a lawsuit <i>Examples:</i> Accidents, employment disputes, insurance claims, or rights t		
	✓ No ☐ Yes. Describe each claim		
34.	Other contingent and unliquidated claims of every nature, including rights to set off claims	counterclaims of the debtor and	
	✓ No ☐ Yes. Describe each claim		
35.	Any financial assets you did not already list		
	✓ No✓ Yes. Give specific information		
36.	Add the dollar value of all of your entries from Part 4, including any eattached for Part 4. Write that number here		→ \$250.00
Pa	art 5: Describe Any Business-Related Property You Own	or Have an Interest In. List	t any real estate in Part 1.
37.	Do you own or have any legal or equitable interest in any business-re	elated property?	
	✓ No. Go to Part 6. ☐ Yes. Go to line 38.		
			Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions you already earned		
	✓ No ☐ Yes. Describe		
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copdesks, chairs, electronic devices	iers, fax machines, rugs, telephones	,
	✓ No ☐ Yes. Describe		

Deb	tor 1	Emerick McKesey	Case number (if known)	17-16223AMC13
40.	Machin	ery, fixtures, equipment, supplies you use in business, and tools of yo	our trade	
	✓ No ☐ Yes	s. Describe		
41.	Invento	ry		
	✓ No ☐ Yes	. Describe		
42.	Interest	s in partnerships or joint ventures		
	✓ No ☐ Yes	. Describe Name of entity:	% of owners	hip:
43.	Custon	ner lists, mailing lists, or other compilations		
	✓ No ☐ Yes	Do your lists include personally identifiable information (as defined in No Yes. Describe	in 11 U.S.C. § 101(41A))?	
44.	Any bu	siness-related property you did not already list		
	✓ No ☐ Yes	s. Give specific information.		
45.		e dollar value of all of your entries from Part 5, including any entries fo d for Part 5. Write that number here		→ \$0.00
Pá		Describe Any Farm- and Commercial Fishing-Related Pro If you own or have an interest in farmland, list it in Part 1.	perty You Own or Ha	ave an Interest In.
46.	Do you	own or have any legal or equitable interest in any farm- or commercia	I fishing-related property	?
		Go to Part 7. Go to line 47.		
				Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm a	nimals es: Livestock, poultry, farm-raised fish		·
	✓ No ☐ Yes			
48.	Crops	either growing or harvested		
		s. Give specific rmation		
49.	Farm a	nd fishing equipment, implements, machinery, fixtures, and tools of tra	ade	
	✓ No ☐ Yes	·		
50.	Farm a	nd fishing supplies, chemicals, and feed		
	✓ No ☐ Yes			

Debt	otor 1 Emerick McKesey	Case num	ber (if known) 17-162	223AMC13
51.	Any farm- and commercial fishing-related property you	ı did not already list		
	✓ No ☐ Yes. Give specific information		-	
52.	Add the dollar value of all of your entries from Part 6, in attached for Part 6. Write that number here		_	\$0.00
Pa	art 7: Describe All Property You Own or Have	e an Interest in That You Did	d Not List Above	
53.	Do you have other property of any kind you did not alree Examples: Season tickets, country club membership	eady list?		
	✓ No✓ Yes. Give specific information.		_	
54.	Add the dollar value of all of your entries from Part 7.	Write that number here		\$0.00
Pa	art 8: List the Totals of Each Part of this Forn	n		
55.	Part 1: Total real estate, line 2		> .	\$73,876.00
56.	Part 2: Total vehicles, line 5	\$9,918.00		
57.	Part 3: Total personal and household items, line 15	\$950.00		
58.	Part 4: Total financial assets, line 36	\$250.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	644 446 66	Copy personal property total +	\$11,118.00
63.	Total of all property on Schedule A/B. Add line 55 + li	ine 62	Γ	\$84,994.00

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G	ill in this inf	ormation to ic	lentify your	case:				
D	ebtor 1	Emerick		McKesey	,			
_	anhtan O	First Name	Middle Name	e Last Name				
	ebtor 2 Spouse, if filing)	First Name	Middle Name	e Last Name				
U	Inited States Bar	nkruptcy Court for	the: EASTERI	N DIST. OF PENNS	YLV	ANIA	☐ Check if this is an	
	ase number f known)	17-16223AMC	13				amended filing	
Of	fficial Form	106C						
So	chedule C:	The Prope	rty You Cl	aim as Exemp	ot			04/16
Usi spa	ing the property ace is needed, fi	you listed on Sch	edule A/B: Prop o this page as m	erty (Official Form 106	6A/B)	as your source, list th	esponsible for supplying correct inforr e property that you claim as exempt. ssary. On the top of any additional pa	If more
is to	to state a specification in the control of the certain be certain be cemption of 100%	fic dollar amount e amount of any nefits, and tax-e) % of fair market v	as exempt. Al applicable stat sempt retirementalue under a la	ternatively, you may cutory limit. Some ex nt fundsmay be unl	claim cempt imited mptio	the full fair market ionssuch as those I in dollar amount. I n to a particular doll	you claim. One way of doing so value of the property being for health aids, rights to dowever, if you claim an lar amount and the value of the le statutory amount.	
P	Part 1: Ide	ntify the Prop	erty You Cla	nim as Exempt				
1.	Which set of	exemptions are y	ou claiming?	Check one only,	even i	f your spouse is filing	with you.	
			_	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	•	
	You are o	claiming federal e	xemptions. 11 l	J.S.C. § 522(b)(2)				
2.	For any prope	erty you list on S	chedule A/B th	at you claim as exen	npt, fi	II in the information	below.	
	•	of the property and lists this proper		Current value of the portion you own		unt of the nption you claim	Specific laws that allow exemption	on
				Copy the value from Schedule A/B		ck only one box for exemption		
10	ef description: 6 N. 9th Street rby PA 19023	•		\$73,876.00		\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(1)	
(15		A FMV = \$73,876 claimed for this e A/B:1.1						
3.	(Subject to ad	justment on 4/01/	19 and every 3 y	more than \$160,375? years after that for cas	ses file			

Debtor 1	Emerick McKesey			Case numbe	r (if known)	17-16223AMC13
Part 2:	Additional Page					
	ription of the property and line on A/B that lists this property	Current value of the portion you own		ount of the mption you claim	Specific I	aws that allow exemption
		Copy the value from Schedule A/B		eck only one box for h exemption		
Brief descri 106 N. 9th Darby PA	Street,	\$73,876.00		\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C	. § 522(d)(5)
(2nd exem	eBOA FMV = \$73,876 nption claimed for this asset) chedule A/B:1.1					
Rental Pro	ption: Street, Darby, Pa 19023 opertyFrolove Appraisel schedule A/B:1.2	\$0.00		\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C	. § 522(d)(5)
miles) KBB FMV (1st exem	ption: vrolet Equinox (approx. 60000 \$9,430 Paid in Plan & Cramdown ption claimed for this asset) Schedule A/B:	\$9,430.00		\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C	. § 522(d)(2)
miles) KBB FMV (2nd exen	ption: vrolet Equinox (approx. 60000 \$9,430 Paid in Plan & Cramdown aption claimed for this asset) Chedule A/B:3.1	\$9,430.00		\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C	. § 522(d)(5)
KBB FMV	f-150 (approx. 160000 miles)	\$488.00		\$488.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C	. § 522(d)(2)
	ption: hold goods and furnishings chedule A/B: 6	\$850.00		\$850.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C	. § 522(d)(3)
Brief descrip 6. Wearin Line from S	•	\$100.00		\$100.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C	. § 522(d)(3)
_	ption: accountTD Bank Schedule A/B: 17.1	\$250.00	1	\$250.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C	. § 522(d)(5)

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Fill in this inf	rmation to identi	ify your ooos				
	ormation to identi	iry your case:				
Debtor 1	Emerick First Name	Middle Name	McKesey Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the:	EASTERN DIS	T. OF PENNSYLVAN	IA		
Case number (if known)	17-16223AMC13				☐ Check if this is	s an
(II KHOWH)					amended filing	j
Official Form	106D					
Schedule D:	Creditors Who	o Have Cla	ims Secured by	Property		12/15
Correct informatio On the top of any and a secure claim, list the correction as a much as possic creditor's name.	n. If more space is no additional pages, write ors have claims secunch this box and submit in all of the information the All Secured Claims. If a creditor separately for exparticular claim, list the ible, list the claims in a	red by your properties form to the combelow. ms r has more than combelow. geach claim. If more other creditors in liphabetical order	one secured ore than one n Part 2. As	cout, number the entri on). Edules. You have noth Column A Amount of claim Do not deduct the value of collateral	es, and attach it to thing else to report on the Column B Value of collateral that supports this claim	s form. is form. Column C Unsecured portion If any
2.1		secures the		\$15,000.00	\$0.00	\$15,000.00
Creditor's name	y Tax Claim Bureau	— 652 Maili Si	treet & 101 oad, Darby, PA			
Number Street		_ Brailloid K	oau, Darby, FA			
201 West Front S	Street	As of the dat	e you file, the claim is:	Check all that apply.		
		Continger	nt			
Media City	PA 19063-2768 State ZIP Code	Unliquida ☐ Disputed	ted			
Who owes the deb	t? Check one.	ш .	n. Check all that apply.			
Debtor 1 only Debtor 2 only		_	ment you made (such as		car loan)	
Debtor 1 and D	•	☐ Judgmen	lien (such as tax lien, met lien from a lawsuit	echanics nem		
	the debtors and anothe	er 🔽 Other (inc	cluding a right to offset) tate Taxes Arrears			
to a communit		Real ES	iale Taxes Affeats			
Date debt was inc	urred	Last 4 digits	of account number			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$15,000.00

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Debtor 1 Emerick McKesey		Case number (if known)17-16223AMC13			
Part 1: Additional Page After listing any entries on sequentially from the previ		Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
DLJ Mortgage Capital, Inc. Creditor's name c/o Selene Finance Number Street P.O. Box 422039 HOUSTON TX 77242-4239 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	Describe the property that secures the claim: 106 N. 9th Street Darby PA 19023 As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, modulus) Judgment lien from a lawsuit Other (including a right to offset) 1st Mortgage	s mortgage or secured	\$73,876.00 car loan)	\$36,124.00	
Date debt was incurred	_ Last 4 digits of account number	9 9 8 5			
DLJ Mortgage Capital, Inc. Creditor's name c/o Selene Finance Number Street P.O. Box 422039	Describe the property that secures the claim: 106 N. 9th Street Darby PA 19023 As of the date you file, the claim is:	\$40,000.00 Check all that apply.	\$40,000.00		
HOUSTON TX 77242-4239 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred Various	Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, mage) Judgment lien from a lawsuit Other (including a right to offset) Mortgage arrears Last 4 digits of account number		car loan)		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$150,000.00

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Debtor 1	Emerick Mo	Kesey		Case number (if known) _ 17-16223AMC13					
Part 1:	-	_	this page, number them ous page.	Column A Amount of claim Do not deduct the value of collateral Column A Value that s		Column C Unsecured portion If any			
2.4			Describe the property that secures the claim:	\$61,865.04	\$0.00	\$61,865.04			
I.R.S. Creditor's name Special Proc Number Street	et	anch	REAL ESTATRE AND PERSONALLY						
P.O. Box 12 Philadelphia	051	19105-2051 ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed						
Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt			Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Taxes						
Date debt wa	s incurred		Last 4 digits of account number						
Wells Fargo Creditor's name PO Box 196 Number Stree	57		Describe the property that secures the claim: 2013 Chevrolet Equinox	\$22,661.81	\$9,430.00	\$13,231.81			
At least or Check if t	only only and Debtor 2	only tors and another	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, med Judgment lien from a lawsuit Other (including a right to offset) Vehicle Loan	mortgage or secured	car loan)				
Date debt wa	s incurred	11/2013	Last 4 digits of account number	2 4 8 1					
Paid in Plan	& Cramdo	wn							

Add the dollar value of your entries in Column A on this page. Write that number here:

\$84,526.85

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$249,526.85

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Fill in this inf	ormation to i	dentify your c	ase:			
Debtor 1	Emerick		McKesey			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court fo	rthe: EASTERN	DIST. OF PENNSYLVANIA			
Case number	17-16223AMC	13		_	L Object Making	
(if known)				_	Check if this is a amended filing	an
Official Form	106E/F					
Schedule E/	F: Creditor	s Who Hav	e Unsecured Claims			12/15
Do not include an If more space is n to this page. On t	y creditors with eeded, copy the he top of any ad	partially secured Part you need, fi ditional pages, w	and on Schedule G: Executory Co claims that are listed in Schedule Ill it out, number the entries in the rrite your name and case number secured Claims	e D: Creditors Who H boxes on the left. A	old Claims Secur	ed by Property.
1. Do any credit	tors have priority	unsecured clair	ns against you?			
☐ No. Go t			,			
✓ Yes.						
claim. For ear show both prio more space is claim, list the	ch claim listed, id ority and nonprior s needed for priori other creditors in	entify what type o ty amounts. As n ty unsecured clair Part 3.	creditor has more than one priority of claim it is. If a claim has both priority of claim it is. If a claim has both priority of claims in a mas, fill out the Continuation Page of the instructions for this form in the ins	rity and nonpriority am Iphabetical order acco Part 1. If more than o	ounts, list that clain	m here and or's name. If
` '	,			Total claim	Priority amount	Nonpriority amount
2.1				\$4,000.00	\$4,000.00	\$0.00
Cibik and Catalo	do, P.C.					
Priority Creditor's Nam 225 S. 15th Stre			Last 4 digits of account number			
Number Street	eı		When was the debt incurred?	09/08/2007	_	
Suite 1635			As of the date you file, the claim	is: Check all that app	ly.	
Philadelphia, PA	19102		Contingent			
			Unliquidated			
City	State	ZIP Code	Disputed			
Who incurred the	debt? Check	one.	Type of PRIORITY unsecured cla	aim:		
Debtor 1 only Debtor 2 only			Domestic support obligations	46		
Debtor 1 and D	Debtor 2 only		Taxes and certain other debts Claims for death or personal in		ent	
At least one of	the debtors and	another	intoxicated	.,, , 1010		
Check if this o	claim is for a con	nmunity debt	✓ Other. Specify			
Is the claim subje	ct to offset?		Attorney fees for this cas	е		
✓ No Yes						

Debtor 1 Emerick McKesey	Cas	e num	ber (if know	_(n) 17-16223AM	C13	
Part 1: Your PRIORITY Unsecured C	laims Continuation Page					
After listing any entries on this page, number ther previous page.	n sequentially from the	Tot	al claim	Priority amount	Nonpriority amount	
2.2			\$2,775.00	\$2,775.00	\$0.00	
Commonwealth of PA	- Last 4 digits of account number					
Priority Creditor's Name Dept. of Revenue				-		
Number Street	_ when was the dept incurred?	005		_		
Bureau of Compliance	- As of the date you file, the claim is:	Chec	k all that ap	ply.		
P.O. Box 280946	_ ☐ Contingent ☐ Unliquidated					
Harrisburg PA 17128-0946 City State ZIP Code	- Disputed					
Who incurred the debt? Check one.	Type of PRIORITY unsecured claim	1:				
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Domestic support obligations ☐ Taxes and certain other debts you ☐ Claims for death or personal injury intoxicated			nent		
Check if this claim is for a community debt	Other. Specify					
Is the claim subject to offset?						
✓ No Yes						
2.3			\$5,858.63	\$5,858.63	\$0.00	
Delaware County Tax Claim Bureau	- Last 4 digits of account number	9 7	7 0 0			
Priority Creditor's Name Government Center Building	When was the debt incurred?	<u> </u>		-		
Number Street	_ when was the debt incurred?			_		
201 West Front Street	- As of the date you file, the claim is:	Chec	k all that ap	ply.		
	Contingent					
Media PA 19063-2768	Unliquidated Disputed					
City State ZIP Code	ш .					
Who incurred the debt? Check one. Debtor 1 only	Type of PRIORITY unsecured claim	1:				
Debtor 2 only	☐ Domestic support obligations☐ Taxes and certain other debts you	u owe	the governr	nent		
Debtor 1 and Debtor 2 only	Claims for death or personal injury while you were					
At least one of the debtors and another	intoxicated					
Check if this claim is for a community debt ls the claim subject to offset?	Other. Specify					
No						
Yes						
2.4			\$3,880.71	\$3,880.71	\$0.00	
Priority Creditor's Name	- Last 4 digits of account number	7 8	0 0	_		
Government Center Building	When was the debt incurred?					
Number Street 201 West Front Street		٥.		_		
	 As of the date you file, the claim is: Contingent 	Chec	к all that ap	ріу.		
Madia BA 10000 0700	Unliquidated					
Media PA 19063-2768 City State ZIP Code	- Disputed					
Who incurred the debt? Check one.	Type of PRIORITY unsecured claim	1:				
Debtor 1 only	Domestic support obligations					
Debtor 2 only	Taxes and certain other debts you		-	nent		
Debtor 1 and Debtor 2 only At least one of the debtors and another	Claims for death or personal injur	y while	e you were			
Check if this claim is for a community debt	intoxicated ☐ Other. Specify					
Is the claim subject to offset?						
No Yes						

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Debtor 1 Emerick McKesey			Case number (if known)17-16223AMC13				
Part 1: Your F	RIORIT	Y Unsecured C	Claims Continuation Page				
After listing any entrie previous page.	s on this	page, number the	m sequentially from the	Total claim	Priority amount	Nonpriority amount	
2.5				\$14,104.22	\$14,104.22	\$0.00	
I.R.S. Priority Creditor's Name			 Last 4 digits of account number 				
Special Procedures Branch			_ When was the debt incurred?				
Number Street Insolvency Unit P.O. Box 12051			As of the data you file the eleim				
			 As of the date you file, the claim Contingent 	i is. Check all that app	ny.		
Philadelphia City	PA State	19105-2051 ZIP Code	Unliquidated Disputed				
Who incurred the debt	? Chec	k one.	Type of PRIORITY unsecured cla	aim:			
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No			 □ Domestic support obligations ☑ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify 				
Yes							

Debtor 1	Emerick McKesey	Case number (if known) 17-16223AMC13
Part 2:	List All of Your NONPRIORITY	Unsecured Claims
4. List all If a cree type of	es I of your nonpriority unsecured claims in editor has more than one nonpriority unsecuted claims it is. Do not list claims already inclu	Submit this form to the court with your other schedules. In the alphabetical order of the creditor who holds each claim. For each claim, list the creditor separately for each claim. For each claim listed, identify what ded in Part 1. If more than one creditor holds a particular claim, list the other creditors in insecured claims, fill out the Continuation Page of Part 2.
	N INFOSOURCE LP AS AGENT FOR reditor's Name	
FIA CARD	Street Street	When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated
Debtor Debtor Debtor At least Check Is the claim	State ZIP Code ed the debt? Check one. 1 only	 ✓ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Phone
4.2 Ashley Fu Nonpriority Cr assigns a Number of Americ	editor's Name s assignee of Laboratory Corp Street a Holdings t Capital Services	\$394.00 Last 4 digits of account number 3 7 1 0 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed
Debtor Debtor Debtor At least Check		Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify ☐ Debt

Debtor 1	Emerick McKesey	Case number (if known) 17-16223AMC13					
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page					
After listing	g any entries on this page, number the age.	em sequentially from the Tota	l claim				
4.3			\$71.00				
Commerci	ial Acceptance	Last 4 digits of account number K D G 9					
Nonpriority Cr	editor's Name	When was the debt incurred? 09/2015					
2300 Getty Number	ysburg Rd Street	As of the date you file, the claim is: Check all that apply.					
		☐ Contingent					
		Unliquidated					
Camp Hill	PA 17011	Disputed					
City	State ZIP Code	Type of NONPRIORITY unsecured claim:					
	ed the debt? Check one.	☐ Student loans					
Debtor		Obligations arising out of a separation agreement or divorce					
☐ Debtor 2	2 only 1 and Debtor 2 only	that you did not report as priority claims					
	one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts					
☐ Check i	if this claim is for a community debt	✓ Other. Specify Collection Attorney					
_	subject to offset?	Concomon Amornia,					
☑ No	•						
Yes							
Original C	reditor Name: CAPITOL INSURAN	ICE COMPANY					
Collection	ı						
4.4			\$89.00				
Keystone	Col	Last 4 digits of account number 3 7 0 5	Ψ03.00				
Nonpriority Cr		When was the debt incurred? 2012					
220 North							
Number	Street	As of the date you file, the claim is: Check all that apply. — ☐ Contingent					
		☐ Contingent ☐ Unliquidated					
		— Disputed					
Lancaster City	PA 17602 State ZIP Code	Time of NONDDIODITY uncestived elemen					
	ed the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans					
☐ Debtor	1 only	☐ Obligations arising out of a separation agreement or divorce					
☐ Debtor 2		that you did not report as priority claims					
	1 and Debtor 2 only one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts					
ш		Other. Specify					
_	if this claim is for a community debt	Medical Expenses					
No No	subject to offset?						
Yes							
ш	reditor Name: PULMONARY ASSO	C OF DREXEL HIL					
Collection							

DISMISSED

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Debtor 1	Emerick McKesey	Case number (if known) 17-16223AMC1	3
Part 2:	Your NONPRIORITY Unsec	ured Claims Continuation Page	
After listin	ng any entries on this page, number th page.	nem sequentially from the	Γotal claim
4.5			\$320.00
Monterey	/ Col	Last 4 digits of account number 8 9 4 0	
, ,	Creditor's Name	When was the debt incurred? 11/2012	
Number	enida de la Plata Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
		Unliquidated	
Oceansio	de CA 92056	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
	red the debt? Check one. r 1 only	☐ Student loans	
ш	r 2 only	Obligations arising out of a separation agreement or divorce	
	r 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At leas	st one of the debtors and another	☐ Debts to pension or profit-snaring plans, and other similar debts ☐ Other. Specify	
☐ Check	if this claim is for a community debt	Collection Attorney	
	m subject to offset?		
☑ No			
Yes	0		
Collectio	Creditor Name: LUMINESS AIR		
4.6		_	\$200.00
PayPal Ir		Last 4 digits of account number 7 2 0 8	
Po Box 4	Creditor's Name	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
-		☐ Unliquidated ☐ Disputed	
Omaha	NE 68145-4178		
City Who incur	State ZIP Code red the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	r 1 only	Student loans	
	r 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
ш	r 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
ш	st one of the debtors and another	Other. Specify	
_	if this claim is for a community debt	Services	
	m subject to offset?		
✓ No ☐ Yes			
∟			

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Debtor 1	Emerick McKesey	Case number (if known) _ 17-16223A	MC13
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listin	ng any entries on this page, number the page.	em sequentially from the	Total claim
4.7			\$48.00
TekCollec	ct Inc	Last 4 digits of account number 0 0 4 0	
	creditor's Name	When was the debt incurred? 10/2015	
PO Box 1 Number	Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
		Unliquidated	
Columbu	s OH 43216	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
	red the debt? Check one.	Student loans	
☐ Debtor ☐ Debtor	,	Obligations arising out of a separation agreement or divorce	
	1 and Debtor 2 only	that you did not report as priority claims	
At leas	st one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check	if this claim is for a community debt	Collection Attorney	
Is the clair	m subject to offset?	·	
☑ No			
Yes			
•	Creditor Name: HANGER PROSTHE	ETICS ORTHOTICS	
Account (
Account	Ciosed		
4.8			\$208.97
Wells Far	<u> </u>	Last 4 digits of account number 3 0 6 0	
	creditor's Name t Recovery Payment Pro. Dept.	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
A0143-04	.2	Contingent	
P.O. Box	63491	Unliquidated	
San Fran	cisco CA 94163	─ ☑ Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
Debtor	red the debt? Check one.	☐ Student loans	
ш	· 2 only	Obligations arising out of a separation agreement or divorce	
ш	1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At leas	st one of the debtors and another	Other. Specify	
☐ Check	if this claim is for a community debt	Overpayments	
	m subject to offset?		
✓ No			
Yes			

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Debtor 1	Emerick McKes	еу			Case	e number (if known)
Part 3:	List Others to	о Ве	e Notified Abo	ut a Debt That You Alread	y Li:	sted
For ex credite debts	cample, if a collection or in Parts 1 or 2, the	on aç nen li arts	gency is trying to ist the collection 1 or 2, list the ad	collect from you for a debt you a agency here. Similarly, if you ha ditional creditors here. If you do	owe ave r	ebt that you already listed in Parts 1 or 2. to someone else, list the original more than one creditor for any of the have additional parties to be notified for
	n Mortgage Servi	ce. I	LIC	On which entry in Part 1 or F	Part 2	2 did you list the original creditor?
Name PO Box 3 4	489			Line of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number	Street					Part 2: Creditors with Nonpriority Unsecured Claims
Anaheim City		A tate	92803 ZIP Code	— Last 4 digits of account num	ber	7 9 3 7
•	Cataldo, P.C.			_		2 did you list the original creditor?
	tnut Street Street 0			Line of (Check one): Required Notification		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Philadelpl City		A tate	19106 ZIP Code	Last 4 digits of account num	ber	
	iladelphia			On which entry in Part 1 or F	Part 2	2 did you list the original creditor?
_{Name} Bankrupt o	cy Unit			Lineof (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number 15th Floo i	Street r			Required Notification		Part 2: Creditors with Nonpriority Unsecured Claims
1515 Arch	Street			 Last 4 digits of account num 	ber	
Philadelpl		Α	19102			
City	St	tate	ZIP Code			
Equifax				On which entry in Part 1 or F	Part 2	2 did you list the original creditor?
Name P.O. Box i	740241			Line of (Check one):	П	Part 1: Creditors with Priority Unsecured Claims
Number	Street			Required Notification		Part 2: Creditors with Nonpriority Unsecured Claims
Atlanta City		i A tate	30374 ZIP Code	Last 4 digits of account num	ber	
Experian				On which entry in Part 1 or F	Part 2	2 did you list the original creditor?
_{Name} Profile M a	aintenance			Line of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number P.O. Box !	Street 9558			Required Notification		Part 2: Creditors with Nonpriority Unsecured Claims
				 Last 4 digits of account num 	ber	
Allen City	T.	X tate	75013 ZIP Code	_		— — —

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Debtor 1	Emerick McKes	еу			Cas	e number (if known)17-16223AMC13
Part 3:	List Others to	Ве	Notified Abo	ut a Debt That You Already	y Li	isted Continuation Page
	& Associates			On which entry in Part 1 or F	•art	2 did you list the original creditor?
Name 305 York i	Road			Line of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number	Street			Notice Only-SELENE		Part 2: Creditors with Nonpriority Unsecured Claims
Suite 300				— FINANCE	ш	The second of th
				 Last 4 digits of account num 	ıber	
Jenkintow City		A ate	19046 ZIP Code	_		
Oity	310	ale	Zii Code			
I.R.S.				On which entry in Part 1 or F	art '	2 did you list the original creditor?
Name Special Pr	ocedures Branch	1		Line of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number	Street			Required Notification		Part 2: Creditors with Nonpriority Unsecured Claims
Insolvency				_	ш	, , . ,
P.O. Box 2				 Last 4 digits of account num 	ıber	
Philadelph City	nia P/ Sta		19114-0326 ZIP Code	_		
o,			0000			
	of Revenue			On which entry in Part 1 or F	art '	2 did you list the original creditor?
Name Bankrupto	y Division			Line of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number	Street			Required Notification	_	Part 2: Creditors with Nonpriority Unsecured Claims
	Compliance			_		, ,
P.O. Box 2				 Last 4 digits of account num 	ıber	
Harrisburg City	<u> </u>	A ate	17120-0946 ZIP Code	_		
Ony	0	210	211 0000			
	V BOTTIGLIERI,E	ESQ		On which entry in Part 1 or F	art '	2 did you list the original creditor?
Name MICHAEL	FX GILLIN & ASS	OCI	ATES	Line of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number	Street NROE STREET			DeLAWARE COUNTY	_	Part 2: Creditors with Nonpriority Unsecured Claims
				— TAX CLAIM BUREAU	_	, ,
MEDIA, PA	4			 Last 4 digits of account num 	ıber	
City	Sta	ate	ZIP Code	<u> </u>		
,						
Trans Uni	on Corporation			On which entry in Part 1 or F	art	2 did you list the original creditor?
Name Public Red	cords Department	t		Line of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number	Street			Required Notification		Part 2: Creditors with Nonpriority Unsecured Claims
555 West	Adams Street			_	ш	The second of th
				 Last 4 digits of account num 	ıber	
Chicago City	IL Sta		60661 ZIP Code	_		
Oity	310	aic	Zii Code			
	go Dealer Service	s		On which entry in Part 1 or F	art •	2 did you list the original creditor?
Name Attn: Bank	kruptcv			Line of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number	Street					Part 2: Creditors with Nonpriority Unsecured Claims
PO Box 19	9657			_	Ш	1 . a.s. 2. Oroanoro wan Horipholity Orisocolica Olalilis
				 Last 4 digits of account num 	ıber	2 4 8 1
Irvine City	C/		92623 ZIP Code	_		_
~ n.y	016		0000			

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Debtor 1 Emerick McKesey				Case number (if known) _ 17-16223AMC13					
Part 3:	List Others	to Be	Notified Ab	out a Debt That You Already	ut a Debt That You Already Listed Continuation Page				
William Cr	aig, Esq.			On which entry in Part 1 or P	art 2 did you list the ori	iginal creditor?			
Name 110 Marter Avenue Number Street Suite 301				Line of (Check one): Collecting for - Wells Fargo	—	th Priority Unsecured Claims th Nonpriority Unsecured Claims			
Moorestov City	vn	NJ State	08057 ZIP Code	—— Last 4 digits of account num	ber				

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Debtor 1	Emerick McKesey	Case number (if known)	17-16223AMC13	
Part 4:	Add the Amounts for Each Type of Unsecured Claim			

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$26,618.56
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	^{6d.} +	\$4,000.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$30,618.56
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	^{6i.} +	\$1,518.84
	6j.	Total. Add lines 6f through 6i.	6j.	\$1,518.84

Fill in this inf	ormation to id	dentify your case:			
Debtor 1	Emerick		McKesey		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	Eirot Nomo	Middle Name	Last Name		
(Spouse, ii iiiiig)	riist Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for	the: EASTERN DIST. C	OF PENNSYLV	ANIA	
Case number	17-16223AMC	13		☐ Check if this is a	n
(if known)				amended filing	
Official Form	106G				
Schedule G	: Executory	Contracts and U	Jnexpired L	_eases	•
No. Che ✓ Yes. Fill List separate is for (for exa executory cor	eck this box and fil in all of the inform ely each person o ample, rent, vehic itracts and unexpi	r company with whom you le lease, cell phone). Se red leases.	with your other so ontracts or leases ou have the cont e the instructions	hedules. You have nothing else to report on this fo are listed on <i>Schedule A/B: Property</i> (Official Form tract or lease. Then state what each contract or for this form in the instruction booklet for more exa	n 106A/B). lease
Person or	company with w	hom you have the contra	act or lease	State what the contract or lease is for	
2.1 Glen Bla	ke			_ lease	
852 Main				Contract to be ASSUMED	
Number S Darby Pa	Street				
Dai by Fa	4			_	
City		State	7IP Code	_	

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Fi	ll in this inf	ormation to id	entify your case:						
De	btor 1	Emerick First Name	Middle Name	McKesey Last Name					
	btor 2 bouse, if filing)	First Name	Middle Name	Last Name					
Un	ited States Bai	nkruptcy Court for	the: EASTERN DIS	T. OF PENNSYLVANIA					
	se number known)	17-16223AMC1	3		☐ Check if this is an amended filing				
	Official Form 106H								
Sc	hedule H:	Your Code	btors			12/1			
two need	married peopled, copy the e. On the top	le are filing togeth Additional Page, t	as complete and accurate as possible. If rrect information. If more space is the left. Attach the Additional Page to this wn). Answer every question.						
_	Yes								
2.	include Arizon No. Go t Yes. Did No Yes	a, California, Idaho o line 3. I your spouse, form	o, Louisiana, Nevada, ner spouse, or legal ed	New Mexico, Puerto Rico, Texquivalent live with you at the tim					
3.	In Column 1,	list all of your cod	debtors. Do not incli	ide your spouse as a codebte	or if your spouse is filing with you. List the				

person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on *Schedule D* (Official Form 106D), *Schedule E/F* (Official Form 106E/F), or *Schedule G* (Official Form 106G). Use

Column 1: Your codebtor

Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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		DUC	ume	iii Paye	27 01 4	3				
Fill in this informat	ion to iden	tify your case:								
	irst Name	Middle Name		McKesey Last Name		- Che	ck if th	iis is:		
Debtor 2 (Spouse, if filing) F	irst Name	Middle Name		Last Name		- -	An ar	nended filing		
United States Bankrup Case number 1	tcy Court for th		IST.	OF PENNSYLV	'ANIA	- 🗖		plement showin er 13 income as	•	
(if known)							MM /	DD / YYYY		
Official Form 106	•									
Schedule I: Your	Income									12/15
about your spouse. If myour name and case num Part 1: Describe 1. Fill in your employn	Employme). Answer every o	-			•	_			
information.			Deb	otor 1			Deb	otor 2 or non-fili	ng spou	se
If you have more that job, attach a separate with information about	e page Em it	ployment status		Employed Not employed				Employed Not employed		
additional employers.	Occ	cupation	Re	tired						
Include part-time, sea or self-employed wor		ployer's name								
Occupation may inclustudent or homemake applies.		ployer's address	Nun	nber Street			Num	nber Street		
			City		State Zi	o Code	City		State	Zip Code
	Hov	v long employed t	here?					-		_
Part 2: Give Det	ails About	Monthly Incom	ne							
Estimate monthly income non-filing spouse unless y			m. If y	ou have nothing	to report for	any line	, write	\$0 in the space.	Include	your
If you or your non-filing sp	ouse have mo	re than one employ	er, co	mbine the inform	ation for all	employe	rs for tl	hat person on th	e lines be	elow. If

you need more space, attach a separate sheet to this form.

			For Deptor 1	non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$0.00	\$0.00
3.	Estimate and list monthly overtime pay.	3. 🛊	\$0.00	\$0.00
4.	Calculate gross income. Add line 2 + line 3.	4.	\$0.00	\$0.00

Official Form 106I Schedule I: Your Income page 1

Debt	tor 1 Emerick McKesey		Case nur	nber (if k	(nown) <u>17-1</u>	6223AMC13
			For Debtor 1		ebtor 2 or iling spouse	
	Copy line 4 here	4.	\$0.00		\$0.00	
5.	List all payroll deductions:					
	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00		\$0.00	
	5b. Mandatory contributions for retirement plans	5b.	\$0.00		\$0.00	
	5c. Voluntary contributions for retirement plans	5c.	\$0.00		\$0.00	
	5d. Required repayments of retirement fund loans	5d.	\$0.00		\$0.00	
	5e. Insurance	5e.	\$0.00		\$0.00	
	5f. Domestic support obligations	5f.	\$0.00		\$0.00	
	5g. Union dues	5g.	\$0.00		\$0.00	
	5h. Other deductions. Specify:	_ 5h. +	\$0.00		\$0.00	
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	\$0.00		\$0.00	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	. 7.	\$0.00		\$0.00	
8.	List all other income regularly received:					
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$675.00		\$0.00	
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.					
	8b. Interest and dividends	8b.	\$0.00		\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00		\$0.00	
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.					
	8d. Unemployment compensation	8d.	\$0.00		\$0.00	
	8e. Social Security	8e.	\$2,478.00	-	\$0.00	
	8f. Other government assistance that you regularly receive				· ·	
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.					
	Specify: Son Net SSD	8f.	\$695.00		\$0.00	
	8g. Pension or retirement income	 8g.	\$5,333.00		\$0.00	
	8h. Other monthly income. Specify:	8h. 🛊	\$0.00		\$0.00	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$9,181.00		\$0.00	
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$9,181.00	+	\$0.00	\$9,181.00
44	State all other regular contributions to the expenses that you list in the state all other regular contributions to the expenses that you list in the state all other regular contributions to the expenses that you list in the state all other regular contributions to the expenses that you list in the state all other regular contributions to the expenses that you list in the state all other regular contributions to the expenses that you list in the state all other regular contributions to the expenses that you list in the state all other regular contributions to the expenses that you list in the state all other regular contributions to the expenses that you list in the state all other regular contributions to the expenses that you list in the state all other regular contributions to the expenses that you list in the state all other regular contributions to the expenses that you list in the state all other regular contributions to the expenses that you list in the state all other regular contributions to the expenses that you list in the state all other regular contributions to the expenses that you list in the state all other regular contributions to the expenses that you list in the state all other regular contributions to the expenses that you list in the state all other regular contributions are regular contributions.		lo I			
	Include contributions from an unmarried partner, members of your house friends or relatives.	ehold, yo	our dependents, you		,	
	Do not include any amounts already included in lines 2-10 or amounts the Specify:		. ,	xpense	s listed in Sche 11. -	edule J. • \$0.00
	Specify:				11. 7	Ψ0.00
12.	Add the amount in the last column of line 10 to the amount in line 11 income. Write that amount on the Summary of Your Assets and Liabilities if it applies.					\$9,181.00 Combined
13	if it applies. Do you expect an increase or decrease within the year after you file	this for	m?			monthly income
	✓ No. None.	5 101				
	Yes. Explain:					

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F	ill in this inforn	nation to id	entif	y your case:			Cho	ck if this	, io:	
	Debtor 1	Emerick			McKe	sev			ended filing	
		First Name		Middle Name	Last Na		╽ᡖ		lement showing	postpetition
	Debtor 2 (Spouse, if filing)	First Name		Middle Name	Last Na	me			r 13 expenses a ng date:	s of the
	United States Bank	ruptcy Court fo	or the:	EASTERN DIST.	OF PENI	NSYLVANIA		MM / D	D / YYYY	
	Case number (if known)	17-16223 <i>A</i>	MC1	3				, 2	-,	
Of	fficial Form 10)6J					_			
So	chedule J: Yo	our Expe	nses	6						12/15
nai	rect information. I	If more space er (if known).	is ned Ansv	e. If two married peo eded, attach another ver every question.						
F		ibe Your He	ouse	noia						
1.	Is this a joint cas	se?								
2.	Do you have dep	Debtor 2 live in s. Debtor 2 mendents?		parate household? Official Form 106J-2, No Yes. Fill out this infor	·	Dependent's relati	onshi		2. Dependent's	Does dependent
	Do not list Debtor Debtor 2.	1 and	V	for each dependent		Debtor 1 or Debtor			age	live with you?
	Debiol 2.					Son			10	□ No - ▽ Yes
	Do not state the d names.	ependents'				Son			18	No N
										No Yes
3.	Do your expense expenses of peo yourself and you	ple other than		✓ No ☐ Yes						- ☐ Yes
P	art 2: Estim	ate Your O	naoii	ng Monthly Exper	nses					
Est to	timate your expens	ses as of your	bank er the	ruptcy filing date unlibankruptcy is filed.	ess you a	_			-	
				government assista Schedule I: Your Inc					Your expens	ses
4.				nses for your resider iny rent for the ground					4	\$0.00
	If not included in			-						
	4a. Real estate t	axes							4a	\$550.00
	4b. Property, hor	meowner's, or	renter'	s insurance					4b	\$54.00
				ıpkeep expenses					4c.	\$100.00
	4d. Homeowner's								4d.	

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Debtor '	Emerick McKesey	Case number (if known)	17-16223AMC13			
		Your expenses				
5. Ad	ditional mortgage payments for your residence, such as home equity loans	5				
6. Uti	lities:					
6a.	Electricity, heat, natural gas	6a	\$475.00			
6b.	Water, sewer, garbage collection	6b	\$145.00			
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c	\$335.00			
6d.	Other. Specify:	6d				
7. Fo	od and housekeeping supplies	7	\$950.00			
8. Ch	ildcare and children's education costs	8	\$650.00			
9. Clo	othing, laundry, and dry cleaning	9.	\$250.00			
10. Pe	rsonal care products and services	10	\$80.00			
11. Me	dical and dental expenses	11	\$325.00			
	ansportation. Include gas, maintenance, bus or train e. Do not include car payments.	12	\$625.00			
	tertainment, clubs, recreation, newspapers, gazines, and books	13				
	aritable contributions and religious donations	14	\$435.00			
	not include insurance deducted from your pay or included in lines 4 or 20.					
15	a. Life insurance	15a				
151	b. Health insurance	15b	\$375.00			
150	c. Vehicle insurance	15c	\$412.00			
150	d. Other insurance. Specify:	15d.				
16. Ta : Sp	xes. Do not include taxes deducted from your pay or included in lines 4 or 20. ecify: Estimated Income Taxes	16	\$50.00			
17. Ins	stallment or lease payments:					
178	a. Car payments for Vehicle 1	17a				
171	c. Car payments for Vehicle 2	17b				
170	c. Other. Specify:	17c				
170	d. Other. Specify:	17d				
	ur payments of alimony, maintenance, and support that you did not report as ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18				
	ner payments you make to support others who do not live with you. ecify:	19				

Debtor 1		Emerick McKesey	Case number (if known)	17-16223AMC13
		r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a	
	20b.	Real estate taxes	20b	\$415.00
	20c.	Property, homeowner's, or renter's insurance	20c	\$70.00
	20d.	Maintenance, repair, and upkeep expenses	20d	\$185.00
	20e.	Homeowner's association or condominium dues	20e	
21.	Other	r. Specify: See continuation sheet	21. +	\$200.00
22.	Calcu	alate your monthly expenses.		
	22a.	Add lines 4 through 21.	22a	\$6,681.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$6,681.00
23.	Calcu	ulate your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$9,181.00
	23b.	Copy your monthly expenses from line 22c above.	23b. _ _	\$6,681.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$2,500.00
24.	Do yo	ou expect an increase or decrease in your expenses within the year after you	file this form?	
		xample, do you expect to finish paying for your car loan within the year or do you exent to increase or decrease because of a modification to the terms of your mortgage		
	1	No.		
	□ `	Yes. Explain here: None.		

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Debtor 1 Emerick McKesey Case number (if known) 17-16223AMC13

21. Other. Specify:
Newspapers, Periodicals, Books
Health Club
Security System \$35.00

Total: \$200.00

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Fill in this in	Fill in this information to identify your case:							
Debtor 1	Emerick		McKesey					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing) First Name	Middle Name	Last Name					
United States Ba	ankruptcy Court fo	or the: EASTERN DIS	T. OF PENNSYLVANI	<u> </u>				
Case number	17-16223AMC	C13						
(if known)								

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

P	art 1: Summarize Your Assets	
		Your assets Value of what you own
	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$73,876.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$11,118.00
	1c. Copy line 63, Total of all property on Schedule A/B	. \$84,994.00
P	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
•	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$249,526.85
	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$30,618.56
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+\$1,518.84
	Your total liabilities	\$281,664.25
P	art 3: Summarize Your Income and Expenses	
	Camara Tour Moone and Expenses	
•	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$9,181.00
	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$6,681.00

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Deb	etor 1 Emerick McKesey	Case number (if known)17-16223AMC13							
P	Part 4: Answer These Questions for Administrative and Statistical Records								
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?								
	 No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. ✓ Yes 								
7.	What kind of debt do you have?								
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.								
	Your debts are not primarily consumer debts. You have nothing to report this form to the court with your other schedules.	ort on this part of the form. Check this box and submit							
8.	From the <i>Statement of Your Current Monthly Income</i> : Copy your total current Official Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line	, te use the u							
9.	Copy the following special categories of claims from Part 4, line 6 of Sche	dule E/F:							
		Total claim							
	From Part 4 on Schedule E/F, copy the following:								
	9a. Domestic support obligations. (Copy line 6a.)	\$0.00_							

9b. Taxes and certain other debts you owe the government. (Copy line 6b.)

9d. Student loans. (Copy line 6f.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$26,618.56

\$0.00

\$0.00

\$0.00

\$0.00

\$26,618.56

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Fill in this inf	ormation to iden			
Debtor 1	Emerick First Name	Middle Name	McKesey Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the			
Case number (if known)	17-16223AMC13			Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT a	n attorney to help you fill out bankruptcy forms?
✓ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read true and correct.	the summary and schedules filed with this declaration and that they are
X /s/ Emerick McKesey Emerick McKesey, Debtor 1	XSignature of Debtor 2
Date <u>09/20/2017</u> MM / DD / YYYY	Date MM / DD / YYYY

Fill in this in	formation to	identify your case	:		
Debtor 1	Emerick		McKesey		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing) First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court fo	or the: EASTERN DIS	T. OF PENNSYLVAN	IIA	
Case number	17-16223AM	C13			
(if known)	17 TOLLOPAIN	0.10		Check if this is an amended filing	
_					
Official Forn	<u>107</u>				
Statement of	of Financia	Affairs for Ind	lividuals Filing	for Bankruptcy	04/16
	•	nown). Answer every out Your Marital S	· Status and Where Y	ou Lived Before	
1. What is you ☐ Married ☑ Not marr	r current marital	status?			
2. During the la	ast 3 years, have	you lived anywhere o	other than where you li	ve now?	
✓ No			5		
Yes. Lis	t all of the places	you lived in the last 3 y	rears. Do not include wh	ere you live now.	
(Community	• •	•	• .	t in a community property state or territory? Louisiana, Nevada, New Mexico, Puerto Rico, Texas,	
☑ No					
☐ Yes. Ma	ke sure you fill οι	ıt Schedule H: Your Co	debtors (Official Form 1)	06H).	

Del	otor 1	Emerick McKesey		Case nui	mber (if known)	223AMC13
P	art 2:	Explain the Sources of	Your Income			
4.	Fill in th	I have any income from employ the total amount of income you rec tre filing a joint case and you have	eived from all jobs and all b	ousinesses, including par	t-time activities.	calendar years?
	✓ No	s. Fill in the details.				
Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.						lawsuits; royalties;
	List eac	th source and the gross income for	rom each source separately	. Do not include income	that you listed in line 4.	
	□ No ☑ Yes	s. Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions
F	lanua	m. 4 of the comment week until	SSI & SSD	\$25,360.00		
		ry 1 of the current year until I filed for bankruptcy:	Pension	\$42,664.00		
			Rental	\$4,725.00		
		calendar year: December 31, 2016)	SSI & SSD Pension	\$46,416.00 \$63,998.00		
For	the cale	ndar year before that:	SSI & SSD	\$46,416.00		
(Ja	nuary 1 to	December 31, <u>2015</u>)	Pension	\$63,996.00		

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Deb	otor 1	Emerick McKesey	Case number (if known)
P	art 3:	List Certain Payments You Made Before Y	ou Filed for Bankruptcy
6.	Are eith	er Debtor 1's or Debtor 2's debts primarily consumer	debts?
	□ No.	Neither Debtor 1 nor Debtor 2 has primarily consur "incurred by an individual primarily for a personal, fam	ner debts. Consumer debts are defined in 11 U.S.C. § 101(8) as ly, or household purpose."
		During the 90 days before you filed for bankruptcy, did	you pay any creditor a total of \$6,425* or more?
		☐ No. Go to line 7.	
		total amount you paid that creditor. Do not in	otal of \$6,425* or more in one or more payments and the clude payments for domestic support obligations, such as de payments to an attorney for this bankruptcy case.
		* Subject to adjustment on 4/01/19 and every 3 years	after that for cases filed on or after the date of adjustment.
	√ Yes.	Debtor 1 or Debtor 2 or both have primarily consum	ner debts.
		During the 90 days before you filed for bankruptcy, did	you pay any creditor a total of \$600 or more?
		No. Go to line 7.	
			otal of \$600 or more and the total amount you paid that tic support obligations, such as child support and alimony. for this bankruptcy case.
7.	Insiders corporat agent, in	include your relatives; any general partners; relatives of ions of which you are an officer, director, person in contro	payment on a debt you owed anyone who was an insider? any general partners; partnerships of which you are a general partner; ol, or owner of 20% or more of their voting securities; and any managing tor. 11 U.S.C. § 101. Include payments for domestic support obligations
	✓ No ☐ Yes.	List all payments to an insider.	
8.		year before you filed for bankruptcy, did you make a d an insider?	ny payments or transfer any property on account of a debt that
	Include p	payments on debts guaranteed or cosigned by an insider	
	✓ No ☐ Yes.	List all payments that benefited an insider.	

Deb	tor 1	Emerick McKesey	Case number (if known) 17-16223AMC13
Pa	art 4:	Identify Legal Actions, Repossessions, and Foreclosure	s
9.	List all s	1 year before you filed for bankruptcy, were you a party in any lawsuit, such matters, including personal injury cases, small claims actions, divorces ations, and contract disputes.	· · · · · · · · · · · · · · · · · · ·
	✓ No ☐ Yes	. Fill in the details.	
10.	seized,	1 year before you filed for bankruptcy, was any of your property repost or levied? all that apply and fill in the details below.	sessed, foreclosed, garnished, attached,
	ي ا	Go to line 11. Fill in the information below.	
11.		90 days before you filed for bankruptcy, did any creditor, including a base from your accounts or refuse to make a payment because you owed	· · · · · · · · · · · · · · · · · · ·
	✓ No ☐ Yes	. Fill in the details.	
12.		1 year before you filed for bankruptcy, was any of your property in the rs, a court-appointed receiver, a custodian, or another official?	possession of an assignee for the benefit of
	✓ No ☐ Yes		
Pa	art 5:	List Certain Gifts and Contributions	
13.	Within 2	2 years before you filed for bankruptcy, did you give any gifts with a to	al value of more than \$600 per person?
	✓ No ☐ Yes	s. Fill in the details for each gift.	
14.		2 years before you filed for bankruptcy, did you give any gifts or contri charity?	outions with a total value of more than \$600
	✓ No ☐ Yes	s. Fill in the details for each gift or contribution.	
Pa	art 6:	List Certain Losses	
15.		1 year before you filed for bankruptcy or since you filed for bankruptcy isaster, or gambling?	, did you lose anything because of theft, fire,
	✓ No ☐ Yes	s. Fill in the details.	

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Debtor 1	Emerick Mc	Kese	у		Case number (if I	known) 17-16223A	MC13
Part 7:	List Certa	in Pa	ayments or	Transfers			
anyor	ne you consulted	d abo	ut seeking bar	ptcy, did you or anyone else acting on hkruptcy or preparing a bankruptcy preparers, or credit counseling agencies	etition?		-
□ N					·	, ,	,
Cibik and Person Who	I Cataldo, P.C.			Description and value of any prope Retainer & Costs	rty transferred	Date payment or transfer was made	Amount of payment
Number S	nut Street Street			-		09/12/2017	\$3,500.00
Suite 900 Philadelp		PA	19102	-			
City Ccpc@cc	spclaw.com	State	ZIP Code	-			
Debtor Person Who	site address Made the Payment,	if Not	You	-			
anyor Do no No No Y 18. Withir prope	ne who promised of include any pay o es. Fill in the det on 2 years before erty transferred i	d to he ment ails. you fin the	elp you deal v or transfer that iled for bankr ordinary cour	ptcy, did you or anyone else acting o vith your creditors or to make payment you listed on line 16. uptcy, did you sell, trade, or otherwis se of your business or financial affaits a made as security (such as granting of	nts to your creditons e transfer any pro	ors? operty to anyone, oth	er than
Do no □ No	•	d trans	sfers that you h	nave already listed on this statement.			
	es. Fill in the det	ails.		Description and value of any		property or payments	
	Received Transfer	ınty		property transferred 101 Branford Road, Darby, PA 19023	received or del UnKnown	bts paid in exchange	was made ptember, 20
Number S	Street			-			
City Person's re	Selationship to you	state Shei	ZIP Code	-			
19. Withir you a	n 10 years befor re a beneficiary	e you ? (T	filed for bank	ruptcy, did you transfer any property called asset-protection devices.)	to a self-settled t	rust or similar device	e of which

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Deb	otor 1	Emerick McKesey	Case number (if known)	17-16223AMC13
P	art 8:	List Certain Financial Accounts, Instruments, Safe Depo	osit Boxes, and Stor	age Units
20.		year before you filed for bankruptcy, were any financial accounts or it, closed, sold, moved, or transferred?	instruments held in your	name, or for your
		checking, savings, money market, or other financial accounts; certificates of pension funds, cooperatives, associations, and other financial institutions.		s, credit unions, brokerage
	✓ No □ Yes	s. Fill in the details.		
21.	•	now have, or did you have within 1 year before you filed for bankruptourities, cash, or other valuables?	y, any safe deposit box o	or other depository
	✓ No ☐ Yes	s. Fill in the details.		
22.	Have yo	ou stored property in a storage unit or place other than your home with	nin 1 year before you filed	d for bankruptcy?
		s. Fill in the details.		
P	art 9:	Identify Property You Hold or Control for Someone Else)	
23.	-	hold or control any property that someone else owns? Include any prin trust for someone.	operty you borrowed fro	m, are storing for,
	☑ No □ Yes	s. Fill in the details.		
Р	art 10:	Give Details About Environmental Information		
For	the purp	oose of Part 10, the following definitions apply:		
ı	hazardou	nental law means any federal, state, or local statute or regulation concus or toxic substance, wastes, or material into the air, land, soil, surfacts statutes or regulations controlling the cleanup of these substances, w	e water, groundwater, or	
		ins any location, facility, or property as defined under any environment or used to own, operate, or utilize it, including disposal sites.	al law, whether you now	own, operate, or
		us <i>material</i> means anything an environmental law defines as a hazardo ce, hazardous material, pollutant, contaminant, or similar item.	ous waste, hazardous su	bstance, toxic
Rep	ort all n	otices, releases, and proceedings that you know about, regardless of v	vhen they occurred.	
24.	Has any	y governmental unit notified you that you may be liable or potentially li	able under or in violation	of an environmental
	☑ No □ Yes	s. Fill in the details.		

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Deb	tor 1	Emerick McKesey	Case number (if known) 17-16223AMC13		
25.	☑ No	ou notified any governmental unit of any release of hazardous material . Fill in the details.	?		
26.	Have you	ou been a party in any judicial or administrative proceeding under any	environmental law? Include settlements and		
	✓ No ☐ Yes	. Fill in the details.			
Pa	art 11:	Give Details About Your Business or Connections to Ar	y Business		
27.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?				
		A sole proprietor or self-employed in a trade, profession, or other activity, A member of a limited liability company (LLC) or limited liability partnership A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation	•		
		None of the above applies. Go to Part 12. Check all that apply above and fill in the details below for each business.			
28.		2 years before you filed for bankruptcy, did you give a financial statem ncial institutions, creditors, or other parties.	ent to anyone about your business? Include		
	□ No □ Yes	. Fill in the details below.			

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Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?	Debtor 1	Emerick McKesey		Case number (if known)	17-16223AMC13
that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X /s/ Emerick McKesey	Part 12	Sign Below			
Emerick McKesey, Debtor 1 Date	that answ property b	ers are true and correct. I unde by fraud in connection with a ba	rstand that making a false statement, on nkruptcy case can result in fines up to	concealing property, or obta	aining money or
Date Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? No	X /s/ Em	erick McKesey	X		
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?	Emeric	k McKesey, Debtor 1	Signature of Debtor 2		
✓ No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ✓ No	Date	09/20/2017	Date	_	
 ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☑ No 	Did you at	tach additional pages to Your S	tatement of Financial Affairs for Indivi	duals Filing for Bankruptcy	(Official Form 107)?
 ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☑ No 	№ No				
✓ No	Yes				
	Did you pa	ay or agree to pay someone who	o is not an attorney to help you fill out	bankruptcy forms?	
	√ No				
Declaration and Signature (Official Form 119)		Name of person			•

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF PENNSYLVANIA PHILADELPHIA DIVISION

In re	Emerick McKesey	Case No.	17-16223AMC13
		Chapter	13

	Ond	10	
	DISCLOSURE OF COMPENSATION OF ATTORNEY	FOR DEBTOR	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorned that compensation paid to me within one year before the filing of the petition in bankrupt services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in is as follows:	tcy, or agreed to be paid to me, for	
	For legal services, I have agreed to accept	\$7,500.00	
	Prior to the filing of this statement I have received	\$3,500.00	
	Balance Due	\$4,000.00	
2.	The source of the compensation paid to me was: ☑ Debtor ☐ Other (specify)		
3.	The source of compensation to be paid to me is:		
	☑ Debtor ☐ Other (specify)		
4.	✓ I have not agreed to share the above-disclosed compensation with any other personassociates of my law firm.	on unless they are members and	
	☐ I have agreed to share the above-disclosed compensation with another person or passociates of my law firm. A copy of the agreement, together with a list of the name compensation, is attached.	•	
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspect	cts of the bankruptcy case, including	:
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in dete bankruptcy;	ermining whether to file a petition in	

- - b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

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B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Continued Meeting of Creditor Hearings, Addition of Creditors after Filing Petition, Motions to Avoid Liens, Motions for Relief from the Automatic Stay, Motions to Dismiss Case, Adverserial Proceedings & Discharge Litigation, Depositions, Asset Cramdowns, Objection to Proof of Claims, Certification of Stipulation Defaults, Motions for Plan Modifications, Motions for Reconsideration, Vacate Wage Orders, Praceipe for Discharge, Bankruptcy Chapter Conversions, Redemption of Property, Lexis & Pacer Research, Credit, Property, Judgements, & Liens Reports. The above legal services will be billed at a hourly rate of \$300/hour per attorney.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

09/20/2017 /s/ Michael A. Cibik, Esquire

Date

Michael A. Cibik, Esquire Cibik & Cataldo, P.C. 1500 Walnut Street, Suite 900 Philadelphia, PA 19102

Phone: (215) 735-1060 / Fax: (215) 735-6769

Bar No.

/s/ Emerick McKesey	
Emerick McKesey	